Melbourne Institute Working Paper Series

Working Paper No. 11/12

Locating and Designing ‘Journeys Home’: A Literature Review

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Journeys Home: A Longitudinal Study of Factors Affecting Housing Stability
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A Literature Review*

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Melbourne Institute Working Paper No. 11/12

ISSN 1328-4991 (Print)
ISSN 1447-5863 (Online)

June 2012

* This paper was prepared for the Journeys Home study. Journeys Home was initiated and is funded by the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA), and is managed by the Melbourne Institute of Applied Economic and Social Research (Melbourne Institute). The findings and views in this paper should not be attributed to either FaHCSIA or the Melbourne Institute.

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Abstract

In this paper we review previous longitudinal research on homelessness with the aim of identifying the necessary design features of Journeys Home to enable researchers and policy makers to fill the gaps in our knowledge of the causes and consequences of homelessness. We show that despite substantial progress in homelessness research in some areas, particularly in the areas of definition and enumeration, there remains a need for large scale longitudinal data to better understand pathways into and out of homelessness. This requires a survey that is representative of a broader population of people experiencing homelessness as well as people vulnerable to homelessness. A large sample of this sort will enable researchers to rigorously examine pathways into and out of homelessness, the structural and individual level causes of homelessness, and key outcomes of homelessness.

Keywords: Homelessness, housing instability, longitudinal survey research
1 Introduction

Over the last two decades homelessness in Australia has generated extensive media coverage and considerable public, political and research attention. On the one hand homelessness shatters the Australian dream of access to safe, secure and affordable housing for all its citizens. On the other hand, it emphasises the existence of deep distributional inequities that are inconsistent with the countries claims and expectations for its citizens.

On census night 2006 over 104,000 Australian’s were homeless (Chamberlain & Mackenzie 2008). In 2007 the Australian government made a commitment to reduce overall homelessness by half (FaHCSIA 2008). However, although we have a pretty good idea of how many people are homeless in Australia, the Census data that this estimate is based on does not capture the duration of homelessness or the reasons for homelessness. Nor does it provide information about who is at risk of homelessness. To address this gap in our knowledge base the Australian Government committed $11.4m to a National Homelessness Research Agenda.

The Melbourne Institute of Applied Economic and Social Research was commissioned to undertake Journeys Home: A longitudinal study of the factors affecting housing stability as part of the National Homelessness Research Agenda. It is the first large-scale longitudinal study drawn from a broad sample of Australians who are homeless or at risk of homelessness. Journeys Home aims to improve the understanding of, and policy response to, the diverse social, economic and personal factors that are related to homelessness and the risk of becoming homeless.

In this paper we review previous longitudinal research on homelessness with the aim of identifying the necessary design features of Journeys Home to enable researchers and policy makers to fill the gaps in our knowledge of the causes and consequences of homelessness. We show that despite substantial progress in homelessness research in some areas, particularly in the areas of definition and enumeration, there remains a need for large scale longitudinal data to better understand pathways into and out of homelessness. This requires a survey that is representative of a broader population of people experiencing homelessness as well as people vulnerable to homelessness. A large sample of this sort will enable researchers to rigorously examine pathways into and out of homelessness, the structural and individual level causes of homelessness, and key outcomes of homelessness.

The structure of the paper follows. A brief history of homelessness in Australia is discussed in Section 2, with definitions of homelessness following in Section 3. Theoretical frameworks for understanding causes and consequences of homelessness are briefly presented in Section 4. Sections 5 and 6 then summarise prior empirical research on homelessness, with Section 5 focusing on attempts to enumerate the homeless population and Section 6 on longitudinal surveys of the homeless. Section 7 concludes by outlining the implications for the Journeys Home study.
2 A brief history of homelessness in Australia

Homelessness has been a part of Australian society since English settlement, but the causes and characteristics of the homeless have changed over the years. Australian researchers first became interested in homelessness in the early 1970s. The first studies - Alan Jordon’s *Going Bad: Homeless men in an Australian city* (1994), John Dehoog’s (1972) *Skid Row Dossier* and Jim Ward’s (1979) *The street is their home: the hobo’s manifesto* were strongly influenced by American ‘skid row’1 sociologists such as Howard Bahr, Theodore Caplow and David Sternberg. Drawing on Robert Merton’s (1968) theory of structural functionalism Caplow, Bahr and Sternberg used the idea of chronic disaffiliation to describe homelessness as ‘a condition of detachment from society characterised by the absence or the attenuation of the affiliative bonds that link settled persons to a network of interconnected social structures’ (Caplow et al 1968:494). Their approach emphasised the role of human agency in that ‘certain adults withdraw from normative conduct . . . and choose to live at the boarders of society’ (Sosin 1992:171).

In the 1970s two influential reports - the *Report of the Working Party on Homeless Men and Women* (1973) and *Homeless People and the Law* (1976) - suggested that the homeless population was changing. At the time a range of significant structural shifts – economic stagflation, the oil shock of 1973, along with situational factors such as increasing substance abuse, household dissolution and changing attitudes towards domestic violence and family conflict – re-shaped Australia’s social and economic landscape and altered the composition and prevalence of homelessness in Australia. Unlike skid row which was inhabited by a relatively small, homogeneous group of single people, mainly men who were unemployed and often had drinking problems, the ‘new homeless’ included young people, older people, single parents, and began to represent an increasingly significant proportion of those below the poverty line who had previously avoided housing problems. Official recognition of the ‘new homeless’ was signalled when the *Homeless Persons Assistance Act* was passed in 1974. The appearance of the ‘new homeless’ challenged the idea that homelessness could be unproblematically reduced to the presence or absence of shelter or explained solely by reference to individual characteristics.

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1 The term skid-row came from the worker settlements on each side of a road near a timber mill in Seattle, US. Logs were skidded down this road to the timber mill – skid road became skid row. It has subsequently developed connotations of ‘skidding to the bottom of society’, and being ‘on the skids’ (Ward 1979).
3 Defining homelessness

The struggle over how best to define homelessness is an on-going one (Chamberlain & Johnson 2001; Burt 1999; Rossi et al 1987). At one level homelessness is easily defined - anyone without regular access to conventional accommodation could be considered homeless (Rossi et al 1987:1). But what does conventional accommodation and regular access actually mean. Are people in emergency accommodation homeless? Are people temporarily doubling-up with the family and friends, homeless? If so, what constitutes ‘temporary’? Are people in prisons, institutions and refuges homeless? Are people who live in overcrowded or sub-standard accommodation homeless? What is sub-standard accommodation?

These questions highlight the point that defining homelessness is all about determining ‘where homelessness begins and ends’ (Neil & Fopp 1992:1). The problem of where to draw the line between the housed (domiciled) and the homeless has lead some people to question whether there is such a group as the homeless. Watson’s (1984) argument that ‘the concept of homelessness is not a useful one and should be abandoned’ and Field’s (1988) view that ‘the questions - What is homelessness? Who are the homeless? . . . are . . . simply unanswerable’ reflects a broad frustration with the concept. The argument of Redburn & Buss (1986) that there is no ‘correct definition, rather different definitions have different uses’ is more subtle and pragmatic.

While these issues may seem a bit trivial or removed, how homelessness is defined is not just an academic exercise. The nature of the definition has important implications ‘for quantification, the research carried out and the policies devised and pursued’ (Neil & Fopp 1992). Depending on how homelessness is defined the size, composition and causes can vary dramatically (Fitzgerald et al 2001; Wolch et al 1998; Neale 1997; Daly 1996; Neil & Fopp 1992). Not only can this create confusion in the public domain as to what homelessness actually is, how homelessness is defined has a profound impact on the nature and shape of the social policy responses that are pursued. If, for instance, homelessness is defined solely by the absence of shelter (eg sleeping rough) then the policy responses are likely to be very different than if homelessness is defined more broadly.

Although there has been considerable debate, both in Australia (Chamberlain & Mackenzie 1992; Neil & Fopp 1992; Crane & Brannock 1996; Chamberlain & Johnson 2001) and overseas (Watson 1984; Redburn & Buss 1986; Argeriou et al. 1995; Cordray & Pion 1997; Hopper 1997; Jacobs et al 1999; Springer 2000; Watson 2001; Pleace 2005) about how to define homelessness, this was not always the case. Early work considered homelessness to be a ‘condition of those people without a place to live’ (Blasi 1990:228). This interpretation supported a narrow definition of homelessness as literally being without shelter (Fitzgerald et al 2001; Burt 1999; Avramov 1999; Jencks 1994; Chamberlain & MacKenzie 1992; Rossi et al 1987).

However, as researchers reflected on the fact that ‘those whose homelessness is defined by exposure to the elements’ (Blasi 1990:228) were only a relatively small group of the homeless, definitions of homelessness were subsequently rethought. While any effort to draw a line across that ‘continuum demarcating the homed from the homeless is, of necessity somewhat arbitrary, and therefore potentially contentious’ (Rossi et al 1987:1), new definitions were constructed around a continuum of housing circumstances running from the stably housed to the literally homeless (for an Australian example see Neil & Fopp 1992:6 and Edgar & Meert 2006 for a European example). In between the two extremes there are many people who may experience some degree of homelessness without ever literally sleeping rough.

A further distinction to be made relates to whether homelessness should be defined using either an objective assessment of material housing circumstances, or subjective assessments. Both subjective and objective definitions of homelessness are discussed in more detail in the following subsections. In Australia the two commonly used definitions of homelessness fall in one of these two camps and they each serve a different purpose. The first is the Supported Accommodation Assistance Program (SAAP) definition. This is a subjective definition that focuses on the issue of access to safe and secure
accommodation. The second approach, the cultural definition of homelessness, is an objective definition that focuses on peoples current housing circumstances.

3.1 Subjective definitions of homelessness

As recognition of the distinction between home and shelter\(^2\) grew in the late 1970’s and early 1980’s definitions of homelessness were broadened: homelessness was no longer limited to lacking shelter, but began to include the ‘loss of those things which make a ‘home’ in any society’ (Blasi, 1990:208).

In part this development was propelled by limitations with a literal approach but also because of changes in the population experiencing housing problems. Chamberlain & Mackenzie (1992) note that the ‘theoretical response [to conventional definitions] . . . was to seek a broader more inclusive definition of homelessness, to take into account a number of complexities that were not recognised in early literature’ (1992: 279). Part of that response was to give priority to the perceptions of those defined as homeless. That is to be homeless was not solely dependent on the adequacy of the accommodation, but how adequate the actor perceived it to be (Neil & Fopp 1992). According to the Supported Accommodation Assistance Act 1996 (Cth) a person is considered homeless if he or she has inadequate access to safe and secure housing. What is ‘safe’ and what is ‘secure’ housing very much depends on individual actor’s subjective perceptions.

The inclusion of subjective criteria, while drawing out the distinction between home and shelter, also emphasised that individuals have different expectations about what constitutes a home. The problem with a subjective approach is that ‘people in ‘conventional’ accommodation are considered homeless if they do not find their accommodation satisfactory’ (Chamberlain & Mackenzie. 1992:280). In short, occupancy in the same accommodation can mean that one household can be classified as housed and another as homeless depending on the actor’s perception.

3.2 Objective definitions of homelessness

Objective definitions are an alternative to subjective definitions. In part objective definitions seek to address the ‘disabling problem of absolute relativism’ (Chamberlain & Mackenzie 1992:290) common to subjective approaches. Both the US and the UK\(^3\) use ‘accommodation’ based objective definitions based on ‘accepted standards of accommodation’ (Walsh 2011:4). Since the 1990s Australia has also moved in this direction and the best known approach is the cultural definition of homelessness based on the arguments put forward by Chamberlain and Mackenzie (1992). The core idea underpinning the cultural definition is that there are shared community standards about the minimum accommodation that people can expect to achieve in contemporary society (Chamberlain & MacKenzie 1992). The minimum for a single person (or couple) is a small rental flat with a bedroom, living room, kitchen and bathroom and an element of security of tenure provided by a lease. This has led to the identification of ‘primary’, ‘secondary’ and ‘tertiary’ homelessness. Primary homelessness includes all people without conventional accommodation, such as people living on the streets, or using cars or railway carriages for temporary shelter. Secondary homelessness includes people who move frequently from one form of temporary shelter to another including emergency accommodation (shelters). Tertiary homelessness refers to people staying in boarding houses on a medium to long-term basis, defined as 13 weeks or longer. They are homeless because their accommodation does not have the characteristics identified in the minimum community standard. The cultural definition is broader than its accommodation based counterparts in the US and the UK.

Although it is best known as the definition used by the Australian Bureau of Statistics to enumerate the homeless population (Chamberlain 1999), the cultural definition has been applied to the dynamic

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\(^2\) The distinction between home as any structure that can provide shelter from the elements and one which reflects certain community expectations, standards and basic rights is drawn out by Peter Marcuse (1990) ‘Homelessness and Housing Policy’ in C.L.M. Caton (ed) Homeless in America. New York: Oxford University Press.

\(^3\) In the US homelessness is defined under the McKinney-Vento Homeless Assistance Act 1987. In the UK homelessness is defined under the Housing Act 1996 (UK)

Although there is a broad consensus around using the cultural definition to enumerate the homeless population, it is a static definition. People frequently move between primary, secondary and tertiary homelessness. A consequence is that researchers have developed a range of time-based or temporal definitions to try and capture the dynamic nature of homelessness, in particular its duration and whether it is a continuous or episodic experience. Terms such as recurrent, long-term, short-term, absolute, iterative, situational, chronic, episodic and persistent homelessness have all found their way into the literature in recent times. It is this temporal dimension that longitudinal surveys are best at capturing.

3.3 Allowing for flexibility

Given the different approaches used to define homelessness both in Australia and elsewhere, it is important when designing a longitudinal study of the homeless that the survey instrument allows for considerable flexibility in enabling users to define homelessness. Housing circumstances need to be captured over a continuum, and the instrument should allow for different definitions – subjective, objective and time-based - of homelessness to be applied so as to ensure that researchers who access the survey data are able to apply a range of definitions of homelessness depending on their needs and interests.

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4 Since the ABS moved the 2011 enumeration ‘in-house’ this consensus is far less stable than in the past and arguably close to collapse.
4 Explaining homelessness

The question of why homelessness exists as a major social problem has been confused with
the question of who is most likely to become homeless (Bassuk et al. 1997: 241).

Alongside the debate about how to define homelessness researchers also put forward different
explanations for the causes of homelessness. A number of authors have pointed out that in the
literature on homelessness there are ‘two polarised camps’ (Jones 1987; Koegel et al 1995: 1642; Jones
1997; Neale 1997; May 2000) with researchers tending to opt for either structural accounts or
Hallebone 1997; Neale 1997; Avramov 1999). This division reflects what anthropologist Claude Levi-
Strauss (1966) saw as a ‘general tendency for belief systems about the causes of inequality to exhibit
themselves in paired dichotomies based on oppositional modes of reasoning’ (cited in Wright 1993:2).

The idea of structure and agency is reflected in a range of discourses – in welfare discourse it is
expressed in the idea of the deserving and undeserving poor, in economics by the ideas of choice and
constraint; in policy terms it shapes interventions, and politically, the left is aligned with a structuralist
response while the right is linked to a more individualist attitude. While this may oversimplify the
matter, the dichotomy is more than ‘historically relevant’ (Neale 1997: 49) given its centrality in
homelessness research and its continued influence on contemporary policy

4.1 Agency

The first explanatory framework takes the notion of human agency, or the active role of individuals in
creating social reality, as its central theme. While individual theories can take a number of forms, what
is common to most is they emphasise the active role of the actor in making decisions and taking
responsibility for their own situation. Individual theories emphasise the ‘active, reflexive character of
human conduct. . . they are unified in their rejection of the tendency . . . to see human behaviour as
the result of forces the actors neither control or comprehend’ (Giddens 1984: xvi).

Individual factors that are commonly cited as causes of homelessness include substance misuse,
mental illness, ‘choice’ and personal inadequacies such as lack of education or poor spending habits,
immoral, mal-adaptive or dysfunctional personalities along with welfare dependency.

Individual explanations are predicated on a belief that reforming individuals can ameliorate social
problems such as homelessness. Some critics have argued that this approach is congruent with an
ideology that casts homelessness in strong moral terms ‘attributing homelessness to laziness,
depravity, . . . as well as to less disparaging conditions such as imbecility, high temper and heredity’
(Piliavin et al 1993:581). Others have argued that in raising individual character flaws to the primary
analytical level attention is diverted from structural factors ‘and [this] ultimately reinforces stereotypes
about the homeless population’ (Elliott & Krivo 1991; Bartholomew 1999:112). Up until the late
1970s Australian researchers and policy makers relied almost exclusively on individual explanations.
However, individual explanations fail to adequately explain why, for instance, some people with drug
or mental health problems or other ‘personal inadequacies’ become homeless when others with
similar issues do not. These imitations, coupled with changes in the composition of the homeless
population in the early 1980s, resulted in a shift in focus onto the relative importance of structural
factors.
4.2 Structural Explanations

It has become increasingly apparent that the problem of homelessness has less to do with personal inadequacy than it does to do with resource scarcity (Hopper & Hamberg 1986:13).

Since the 1980s the dominant form of explanation in Australia falls within the structuralist tradition. These accounts suggest the new forms of homelessness that emerged in the late 70s and early 80s were caused by changing economic, social and political conditions that radically transformed the socio-economic environment. Five structural factors are regularly identified as causes of homelessness. These are poverty, housing and labour market conditions, household dissolution and de-institutionalisation.

Like agency accounts structural explanations also have their limitations. The most obvious problem has to do with structural determinism. Structural determinism occurs when social structures are over emphasized as this ‘suggests that human beings have no control over their lives, but simply act according to the requirements of the social structure – they are determined by it’ (Van Krieken et al. 2000:16).

The issue of structural determinism is relevant here as structural accounts often emphasise that poverty or unemployment are the primary causes of homelessness. What they fail to explain however, is why most poor people and most unemployed people do not become homeless. Similarly, the problem with accounts that focus solely on housing markets is their failure to adequately explain who is least able to compete for scarce housing resources, and consequently who is at increased risk of homelessness. In short ‘the specifics of how that [structural] position translates into homelessness are largely left unexplored’ (May 2000: 614).

Structural factors draw attention to different risk levels in the community. However it is not predetermined what will happen to people in positions of structural disadvantage. Families negotiate unemployment and poverty in different ways; teenagers and parents negotiate conflict in different ways and people respond to housing problems in distinct and sometimes idiosyncratic ways. Certainly risk levels change as structural conditions change, and clearly risk levels are higher for people from certain social backgrounds. However, these factors alone do not explain why some people become homeless, why people have different experiences of homelessness, or why people successfully exit homelessness when others do not. These are the sort of issues Journeys Home intends to investigate.

More recently, many social researchers have questioned the separation of structural factors and human agency and suggested that future research should focus attention on explanations that look at the interactions between macro structures such as changes to the housing and labour markets, and the micro processes which render individuals vulnerable to homelessness (Hutson & Liddiard 1994; Koegel et al 1995; Metraux & Culhane 1999; May 2000; Adkins et al 2003; Clapham 2003).

4.3 Integration: An alternative framework

Current international conceptualisations support the notion of an interaction between structural or macro-level, and individual or micro-level factors as underpinning all forms of homelessness (Adkins et al 2003:5)

… both perspectives are needed to understand contemporary homelessness. Structural factors determine why pervasive homelessness exists now while individual factors explain who is least able to compete for scarce affordable housing (Koegel et al 1995: 1642).
Social scientists have argued that to establish ‘causation’ in the social world it is often necessary to think about both structural factors and the role of human agency. The weaving together of structural and individual elements provides a ‘middle road’ (Jones 1997:100), or a way of thinking that explicitly rejects the idea that homelessness can be unproblematically reduced to a single set of structural or individual factors. The only way to explain why some people and not others in similar social circumstances become homeless, is to elaborate a theoretical framework based on the interaction of macro features of social life with individual action. This approach has been adopted in the US (Snow et al 1994; Koegel et al 1995; Metraux & Culhane 1999) as well as the U.K (Brandon 1980; Hutson & Liddiard 1994; Tomas & Dittmar 1995; Fitzpatrick & Clapham 1999; Fitzpatrick et al 2000; May 2000; McNaughton 2004) and, more recently, in Australia (Johnson et al 2008; Mallett et al 2010).

The structure/agency dichotomy provides a means of thinking about external forces that shape social action and how those forces are negotiated and interpreted by the individual. This takes up Katz’s (1993) argument that the dichotomy between structural and agency theories is ‘silly . . . because human actions reflect both’ and further on that ‘the dichotomy . . . is a social construction more reflective of the institutional organisation of knowledge than of social experience’ (Katz, 1993:441). From this perspective the opposing relationship between agency and structure is an illusion that hides the ‘contingent and interactive relationship between the two, and indicates more about the methodological preferences within academic disciplines’ (Katz, 1993:441). As Jones (1997:100) points out both approaches in ‘their different ways over-simplify the problem and obstruct its solution’.

**Figure 1** Integrated theoretical model
One way of understanding the inter-relationship between structure and agency is to think of structural factors as creating the conditions within which homelessness occurs (see Figure 1). That is at any given time structural factors create different risk levels among certain populations. Within these external constraints certain individual actions (agency) can then compound the problems (Jones, 1997:112). This does not close down the possibility that structural or individual factors on their own may cause homelessness, but it does emphasise how the process of becoming (or avoiding) homeless is mediated through both agency and structure. The inherent strength of thinking this way is that the precise combinations of structure and agency can vary from person to person. This flexibility is important given the diverse range of homeless experiences and multiple needs of homeless people.

Given that Journeys Home is interested in establishing both causes and consequences of homelessness, it is important that the survey instrument capture both structural and individual factors. To fully explore the importance of structural factors however it is also essential that the study has the kind of scale and coverage of different areas so as to enable the examination of variations in macro level factors on individual circumstances. It is only with these features that researchers will be able to systematically examine what combination of individual and structural factors protect people from homeless, and what combination increases the risk they will tip over (and remain) homeless.
5 Counting the homeless: How big a problem?

Despite the importance of defining homelessness and explaining its causes, the question that captures the most policy attention is how many people are homeless. Australia is known as having quite rigorous and robust data on the size of the homeless population (see for example Fitzpatrick & Stephens 2007). The principle reason for this lies with the enumeration work undertaken by the Australian Bureau of Statistics.

The ABS homeless enumeration project builds on a long history of counting the homeless in Australia. In the early 1970s social researcher Alan Jordon (1994:73) estimated that on ‘any given night’ there were between 3,000 – 4,000 homeless people (mainly men) in Melbourne. In Sydney, Les Darcy used three partial censuses of accommodation used by homeless men to estimate the homeless population ‘at any one time’ (Working Party, 1973:11) to be around 3,000.

A decade later the accounting firm Coopers and Lybrand estimated that 40,000 people had no secure housing or were sleeping rough at the time. (Coopers and Lybrand W D Scott 1985: 2,9). In 1989 the Human Rights and Equal Opportunity Commission (HREOC) Report released *Our Homeless Children* (1989). It estimated that approximately 20,000 – 25,000 young people were homeless. In the mid 1990’s Peter Marcuse (1996) also attempted to estimate the number of homeless Australians using ‘all the ‘available evidence’ (p.12). Marcuse suggested that on any given day the rate of homelessness in Australia major capital cities would be about 0.3 per cent of the population.

However, in the mid 1990s the most comprehensive attempt to count the number of homeless people occurred. The Australian Bureau of Statistics (ABS) undertook a special enumeration strategy to estimate the number of homeless people on census night. Using the cultural definition of homelessness (see earlier), it estimated that 105,304 people (including children) were homeless on census night (Chamberlain 1999:3).

On census night in 2001 the ABS repeated its enumeration strategy. This time they estimated that 99,900 people were homeless, or about 5 per cent less than in 1996 (Chamberlain & Mackenzie 2003). The Federal Minister at the time claimed that the overall reduction was the result of government policies, although a more plausible explanation, and one supported by the researchers, was that a series of changes to the counting rules restricted who could be counted as homeless. More specifically changes to the counting rules resulted in the omission of thousands of indigenous people in the Northern Territory.

On census night in 2006 the ABS estimated that 104,676 people were homeless. Despite little overall change from the previous period there were notable changes in the composition of the homeless population: specifically the number of young people (under 24) declined and the number older people and families increased. The 2006 census figures were accepted by the Australian government and subsequently became the basis on which the headline goals of reducing homelessness by half and eliminating rough sleeping were established. In short, the census provides valuable information on the size of the homeless population and it is important for planning and providing services (Chamberlain 1999; Phelean & Link 1999; Metraux et al 2001).

While the census has the advantage of providing very good coverage, it is costly and only conducted every five years. The census under-counts some groups and over-counts others. It also only collects limited information on the circumstances of the homeless and no information on its duration. In short, although the census has provided some important insights into the size and composition of the homeless population, the fact is it was never designed to enumerate the homeless or capture the dynamic patterning of homelessness.

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5 In a press release Kay Patterson, the Minister for Family and Community Services said the report ‘was good news’. Patterson was not referring to the fact that 99,000 people were homeless, but rather that there were fewer homeless people than in 1996. ‘This, Patterson said, was evidence that Government policies were working’. (See http://www.facs.gov.au /internet/ facsinet.nsf /who /minister_media_03118 _homeless)

6 More recently the ABS has released a draft review of the methodology on Counting the Homeless (see ABS 2011). As a result of the review, estimates for the 2001 and 2006 Censuses are being revised.
A number of large-scale cross-sectional surveys of homeless populations have been conducted overseas to provide more detailed information on the circumstances of the homeless. Key examples include: the National Survey of Homeless Assistance Providers and Clients conducted by the US Census Bureau between October 1995 and November 1996; the Milan Count of the homeless, a study of the homeless population in Milano, Italy (Braga and Corno 2009); and a large scale survey of people sleeping in public places or in overnight hostels in France (Marpsat 2002). These studies not only enumerate the homeless population, but they also collect rich information on the circumstances of those surveyed.

More recently, the Australian Bureau of Statistics through its General Social Survey (GSS) has attempted to enumerate the number of Australian adults who have experienced homelessness at some point in their lives, and in the last 10 years. The 2010 GSS found that 2.1 million people had experienced homelessness at some point in their lives and 1.1 million in the last 10 years. The GSS also asked how long people were homeless in the ‘most recent period in their lives’ (Australian Bureau of Statistics 2010). It found that just under one third were homeless for less than a month while 22% were homeless for six months or more. It should be noted that the 2010 GSS only provides information on those who have been homeless in the past – people who are currently homeless are excluded.

However, large scale surveys are uncommon and most research that has been conducted on homelessness involves small surveys with participants typically numbering between 50 and 400. This research has also tended to be localised, with participants drawn from only the one regional area, city or town. This is particularly true of empirical research in Australia.

Point-in-time surveys have identified many correlates of homelessness including: exposure to child abuse, illnesses or accidents; poor socioeconomic outcomes (income, education, unemployment); high housing costs (prices and interest rates), mental illness and poor overall health; and substance use and engagement in other risky behaviours. However although point in time data help to establish the prevalence of mental illness, substance abuse and other similar issues they cannot determine whether these problems are precursors or consequences of homelessness. Piliavin et al (1993:578) stress this point:

> Despite repeated documentation of high rates of behavioural health problems among adults, research has not systematically investigated whether these conditions are causally related to the onset of homeless and to the duration of homeless careers. Consequently assertions as to the conditions contributing to homelessness are virtually without systematic empirical support.

This highlights the most serious problem with point-in-time studies - namely that they implicitly treat homelessness as a static condition rather than a dynamic one. As a result they struggle to provide accurate information on the duration of homelessness, cannot ascertain causal relationships between homelessness and other issues, and, importantly, they struggle to explain why some people tip over into the homeless population when others with similar characteristics and similar socio-economic positions do not? Or why some people remain homeless for long periods when others have only a short experience of homelessness?

It is generally recognised that the best way to address these problems is through longitudinal research (Flinders Institute of Public Policy and Management 1999; The National Evaluation Team 1999; Adkins et al. 2003; LenMac Consulting 2005). Indeed, American researchers have long been aware that longitudinal analysis can help to establish a better understanding of the conditions associated with entering and escaping from homelessness, whether homelessness is a chronic or brief phenomenon, the consequences of becoming homeless, and the conditions that prevent homelessness either from reoccurring or occurring at all (Shlay & Rossi 1992).
6 Understanding pathways: Longitudinal studies of homelessness

A central question in studying homelessness is whether being homeless is a temporary, transitional or episodic condition lasting a relatively short period of time, or whether it is a permanent and chronic problem (Shlay & Rossi 1992:141).

When researchers first began to examine homelessness the prevailing view was that ‘homelessness was a state into which people fell and remained’ (Neil & Fopp 1992:9). This changed as researchers became interested in the ‘process by which people became and remained homeless’ (Blasi, 1990: 212. See also Auerswald & Eyre 2002; Sosin et al 1990; Burt 1999; Neil & Fopp 1992; Shlay & Rossi 1992; Chamberlain & Mackenzie 1992; Wasson & Hill 1998). What underpinned this shift was the recognition that the amount of time people remained homeless varied.

To better understand pathways into and out of homelessness researchers began to undertake longitudinal research (see for instance: Stenberg et al 1995; Sosin et al 1990; Piliavin et al 1993; Craig et al 1996; Piliavin et al 1996; Culhane & Kuhn 1998; Dworsky & Piliavin 2000; Fitzpatrick 2000; Johnson et al 2008; Mallett et al 2010). Some key studies and their features are summarised in Table 1 in the appendix.

In the following chapter we review this literature with the aim of determining priorities for the design of Journeys Home but make it clear that much of the research was undertaken overseas under very different social, cultural and economic conditions. Further, there are inconsistencies in the findings, which are often reflecting different sampling and analytic procedures.

6.1 Durations of homelessness

Among the homeless population three general subgroups have been identified (Toro 2007; Culhane et al 2000). The largest group consists of people whose primary issues are a lack of affordable housing and/or work opportunities. They typically need relatively little support and most of these people return to housing quickly and get on with their lives. Researchers in the US, (Rossi et al 1987; Ziesemer et al 1994: 661) and Europe (Avramov 1999:13; van Doorn 2005:15) have concluded that ‘the overwhelming majority of people’ have a short, one of experience of homelessness.

Another group, sometimes referred to as the ‘transitional’ homeless, become homeless for more diverse reasons, remain homeless for longer and have greater support needs than the first group (Culhane et al 2000). While they generally return to housing, it often takes a couple of attempts. The third group are people who remain homeless for long periods of time, often cycling between the street, institutions and poor quality temporary accommodation. This group are often called the long term or ‘chronically homeless’. Studies consistently show that the characteristics and needs of the long term homeless are very different from the newly homeless (van Doorn 2005:15).

While the majority of people have a short experience of homelessness, there are a number of reasons why understanding the factors that influence the amount of time people are homeless has important policy implications. First, understanding why some people get stuck in the homeless population can provide a more informed basis for creating policy that reduces the amount of time people are exposed to homelessness (Piliavin et al 1993). This is particularly important given the current policy emphasis in Australia to reduce the rate of people who experience long-term homelessness - without knowing why some people become entrenched in homelessness it is difficult to prevent. Second, it is clear that the longer people are homeless, the more their physical and psychological health is damaged (van Doorn 2005; Johnson et al 2008). Reducing the amount of time people are exposed to homelessness has the potential not only to reduce the damaging consequences of homelessness for the individuals involved but also reduce the overall costs of homelessness to the community.
6.2 Factors affecting pathways in and out of homelessness

In our earlier theoretical model we identified a number of risk factors (both structural and individual) thought to be linked to homelessness. In this section we provide a summary of the empirical research relating to risk factors, highlighting where the research gaps are and what factors are important to capture in the Journeys Home survey. We need to bear in mind that the risk factors we identify represent just one side of a coin – on the other side sits protective factors. As Bassuk et al (1997) make clear, in the area of homelessness the difference between risk and protective factors is essentially one of absence or presence – the presence of trauma is a risk factor, its absence a protective factor; low educational attainment is a risk factor, while high educational achievement is a protective factor; unemployment and poverty are risk factors, while employment and security of income can buttress people against homelessness. With this in mind we limit the discussion to risk factors, although we elaborate on specific protective factors where necessary.

6.2.1 Foster Care

Local and international studies indicate that disproportionate numbers of homeless people have experiences in the State care and protection system. Studies tend to focus on out-of-home care as a causal or risk factor for adult homelessness (Johnson & Chamberlain 2008a) (Neil & Fopp 1992; Koegel et al 1995; Bassuk et al 1997; Roman & Wolfe, 1997; Zlotnick et al 1998; Nooe & Patterson 2010), although a few studies have examined whether ‘out-of-home’ care may be more strongly associated with duration of homelessness than its initial onset’ (Herman et al 1997: 254). With respect to the later point the findings are mixed. Calsyn & Morse (1991: 157) found that ‘chronically homeless persons are more likely to have experienced childhood foster care or institutional placement as a child’. In contrast Wong et al (1997) found that experiences of child protection did not have a ‘significant effect of exit rates’ (p417), or on ‘return rates’. Unfortunately, they did not directly test the association between career duration and out-of-home care.

6.2.2 Trauma

Numerous studies have identified a link between childhood trauma and homelessness generally and long term homeless more specifically (Calsyn and Morse 1991; Buhrich, Hodder and Teesson 2000; Zugazaga 2004; Johnson et al. 2011). Trauma is generally understood as physically and/or emotionally painful experiences that overwhelm people’s capacity to cope. Trauma takes many forms – physical and sexual abuse by parents, step parents and/or siblings; neglect; separation from ones family of origin; time in the state care and protection system and witnessing violent acts. Childhood trauma is thought to create difficulties for young people to form and sustain relationships with others and these difficulties often extend into adulthood. Studies also suggest that childhood trauma makes substance abuse more likely and may also be an important factor that predisposes some people to mental health problems as adults (Clark 2001; Read and Ross 2003)

It is also the case that many people experience trauma while they are homelessness. Homeless people are vulnerable to violent assault and homeless women in particular are acutely vulnerable to

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7 Of course Governments can intervene to influence any number of the structural or individual risk factors outlined to offer further protections against a range of risk factors. It is however outside the scope of this paper to review the literature on the effectiveness of the multitude of support services available.

8 The term ‘career’ is used by social scientists to refer to the transitional stages involved in the development of any form of biographical identity (see Becker 1963). The notion of a ‘homeless career’ (Snow & Anderson 1993; Chamberlain & MacKenzie 1998), draws attention to the process of becoming homeless as people pass through various phases before they develop a self-identity as a homeless person. More recently researchers have used the ‘pathways’ metaphor in preference to the ‘careers’ metaphor (see Chamberlain and Johnson 2011). For a critical review of both approaches see Fopp (2009).
sexual assault (Newburn and Rock 2005; Robinson 2010). Trauma is thus both a cause and a consequence of homelessness. There is now growing recognition among policy makers of the importance of trauma informed service delivery approaches.

6.2.3 Family support
Caton et al (2005) is just one of a number of studies that link the duration of homelessness to the availability or absence of adequate family support. Researchers have found that the long term homeless often come from families that have disintegrated or for whom positive relationships are non-existent. There is an obvious connection between problematic family relationships and child protection but not all people who lack family support require assistance from state care and protection systems. Research suggests adequate family support is linked to shorter durations of homelessness and that family support is a crucial factor that enables homeless people to get out of homelessness and remain housed (Wong, Culhane & Kuhn 1997; Rocha, Johnson, McCheney & Butterfield 1996).

6.2.4 Age first homeless
Researchers have also focused on the age people had their first experience of homeless. Piliavin et al (1993:1335) longitudinal study of 303 homeless people found that the age people first become homeless has a ‘significant’ effect on the length of time people are homeless. More specifically, they argue that the younger people first become homeless, the more likely they are to become chronically homeless. Other studies, local and international, support the same conclusion. However Calssyn and Morse (1991) argue that age first homeless does have an effect, but exact the opposite - they suggest the older people are when they become homeless is the most powerful predictor of chronic homelessness. In Australia Johnson et al (2008) argue that the age people had their first experience of homeless is important but that its effect is mediated through other biographical experiences preceding homelessness. They argue that the most significant mediating factor is the experience of childhood trauma. Those people who have their first experience of homelessness at a young age and who experience some form of childhood trauma are more likely to experience chronic homelessness than those who first experience of homelessness at a young age but have no experience of childhood trauma.

6.2.5 Gender and household type
The highly gendered nature of people who sleep rough tends to fuel the public perception that gender, or more specifically being male, somehow contributes to longer homeless careers. Using one year as a measure of long term homelessness Link et al (1994: 1911) found that more men (18 per cent) than women (9 per cent) experienced long term homelessness. They state that the ‘results are consistent with the possibility that the duration of homelessness – as opposed to the incidence alone – dramatically shapes the characteristics of the currently homeless population’.

Relying on point-in-time data Rossi (1989) used a range of cross tabulations to examine the association between length of the current homeless spell and certain demographic characteristics, Rossi found that current age and gender were related to reported spell duration. Specifically women and people under 40 had shorter homeless spells, than men and people over 40 who had longer spells.

However, the reliability of Rossi’s findings are limited by the use of current spell as a measure of duration. In a separate study Farr, Keogel and Burnam (cited in Piliavin et al 1993:578) found considerable evidence of episodic homelessness and that the number of spells (or episodes) is unrelated to the time spent in the current spell. Based on this finding, it would seem that Rossi’s proxy for duration – current episode – is not robust enough to support the assertion that age and gender are predictors of long term homelessness.

In their longitudinal study of homeless-domicile transitions of female family heads, single women and single men Wong & Piliavin (1997) concluded that ‘women, particularly female family heads, exit
homeless spells more rapidly and more often than do males’ (Wong & Piliavin 1997: 420). Similar to Rossi’s findings above, these findings while suggestive are certainly not conclusive. The data they present does not directly touch on duration.

6.2.6 Work histories and education

As far back as the 1920s American sociologists Nels Anderson argued that ‘all the problems of the homeless go back in one way or another to the conditions of his work’ (Anderson, 1923:121). The nexus between employment and homelessness has commonly been viewed in terms of a ‘cause’ of homeless, rather than its persistence. This is understandable given that poverty and unemployment are common experiences among virtually everyone who experiences homelessness. However, some researchers have gone further than reporting on the prevalence of unemployment and instead have focused on the nature of homeless people’s work histories and their levels of education. For instance Calsyn and Morse (1991) found that a lack of education and poor employment histories were associated with chronic homelessness (implied as 2 years or more). In their paper The Duration of Homeless Careers Piliavin et al (1993) reported a strong correlation between long term homelessness and people with less consistent work histories. Caton et al (2005) found that shorter durations of homelessness was associated with current or recent employment and earned income. Phelan & Link (1999) found that lower levels of educational attainment among people who reported experiences of persistent homelessness. In Australia many studies indicate that the educational attainment of the homelessness is relatively low and that most are unemployed or outside of the labour factor. However, no study we are aware of has attempted to investigate the relationship between work histories, education and duration.

6.2.7 Substance abuse and mental illness

Numerous studies, both in Australia and overseas, report disproportionately high rates of substance misuse and mental illness among the homeless. High rates of substance abuse and mental illness often leads people to:

> erroneously interpret such point prevalence data as supporting the conclusion that substance abuse [or mental health problems] is a risk factor for homelessness, whereas the disproportionate representation of substance abuse in a cross section of the homeless population may result in whole or in part from substance abusers, once they become homeless, having delayed rates of exits (i.e higher risks of longer stays’ (Culhane et al 2000: 3)

The evidence suggests that both substance abuse and mental illness are linked to persistent homelessness. First, there is a small body of evidence that indicates substance abuse and mental illness are more prevalent among the long term homeless. Drawing on a sample of 165 men residing in an emergency shelter in St Louis (US) Caslyn and Morse (1991:157) found that ‘chronically homeless persons were more likely to have experienced, substance abuse and mental illness’. In their study of the composition of the homeless population in the US Phelan & Link (1999)argue people with mental health and substance abuse problems ‘tended to be homeless longer than people without these characteristics’ (p.1335) and that elevated levels among the long term population suggest these issues ‘have more to do with its persistence than its cause’. In a study of 147 people with both a substance abuse and mental health problem Leal et al (1998) found the long term homeless are more likely to be schizophrenic and engage in intravenous drug use. In Australia, Johnson et al (2008) and Johnson & Chamberlain (2008b; 2011) found higher rates of substance abuse or mental illness among the long term homeless. They concluded that both mental illness and substance abuse are significant barriers to exiting homelessness.

In addition to these findings a small number of studies have also focused on the chronological sequencing of both mental illness and homelessness and also substance abuse and homelessness. With respect to mental illness a large American study (N=1,531) found that 35 per cent of homeless adults
with mental health issues developed them after becoming homeless (Sullivan et al 2000: 447). In a study of 160 homeless youth in Britain, Craig & Hodson (1998) found that 30 per cent of those reporting mental health problems developed them after becoming homeless; and a large Australian study (N=4291) found that just over half of those with mental health issues developed them following homelessness (Johnson & Chamberlain 2011). These studies indicate that homelessness causes mental health issues for some people, particularly anxiety and depression. In none of these studies however, was there an attempt to assess whether the chronological sequencing of mental illness and substance abuse has an effect on duration. To our knowledge only one study has. Piliavin et al (1993:593-594) found that ‘those whose first hospitalisation take place before they become homeless experience homelessness late and have short careers. In contrast, those whose first hospitalisation takes place after they have at least one spell of homelessness experience homelessness early and have longer homeless careers’.

Similarly, there is a common perception that substance abuse and chronic homelessness are linked but there is considerable contention about the direction of the relationship (Snow & Anderson 1993; Neale 2001; Mallett et al 2005; Kemp et al 2006). Some studies indicate that substance abuse is a risk factor for homelessness, while other studies suggest that homelessness ‘induces drug use’ (Neale 2001: p.354). Johnson & Chamberlain (2008b) found that two thirds of the people who had substance abuse problems (43 per cent in sample of 4,291) developed substance use problems after they became homeless. In a study of 303 homeless and at risk people, Johnson et al (1997), found that substance use occurs both before and following homelessness. They indicate that ‘a multi-directional model is more appropriate’ (p.437) for explaining the relationship between homelessness and substance abuse.

6.2.8 Acculturation and adaptation

In recent years there has been increasing interest in policy and research circles on the processes and experiences individuals encounter when they are homeless. In the past the tendency was to view the homeless as a ‘friendless person isolated from all social contacts of an intimate or personal nature’ (Snow & Anderson, 1993:318). To be sure, social isolation is a relatively common experience among the homeless but in focusing exclusively on isolation researchers neglected to assess the extent to which homelessness creates its own sense of belonging and distinct patterns of behaviour.

In more recent studies evidence has emerged that ‘homeless people have more varied social networks and higher levels of social interaction than originally thought’ (Wallace 1965; Hoch & Slayton 1989; La Gory et al 1991; Auerswald & Eyre 2002). Rather than passive and withdrawn, many people who experience homelessness are active and engaged in and with a range of social networks. Researchers have found that when people remain homeless their mainstream social networks collapse but their social networks connections with other people experiencing homeless grow. This is part of a boarder process of adaptation that occurs over time as homeless people are progressively excluded from mainstream institutions and adjust to their new social environment (Sosin et al 1990; Pears & Noller 1995; Wasson & Hill 1998; May 2000; Auerswald & Eyre 2002; Chamberlain & Johnson 2002; van Doorn 2005).

There is empirical evidence to support the acculturation/adaptation argument. Piliavin et al (1996: 48) found reduced exit rates were correlated with increased acculturation. Similarly, Snow & Anderson (1993); Johnson et al (2008) and others describe how people immersed in the homeless subculture have great difficulty getting out of homelessness.

6.3 Tracking people over time

A core methodological challenge facing longitudinal studies of the homeless, including Journeys Home, is that sample attrition tends to be non-random. Sample attrition refers to the loss of respondents over time, and is a recognised risk in longitudinal research among mobile and marginalised populations. If too many participants drop out of the study, and if they are the most transient or ‘unstable’ then results can be significantly distorted (Sullivan et al 1996; Dworsky &
Piliavin 2000). Research suggests that the people who stay engaged with a longitudinal project are often quite different from those who drop out of the project (Sullivan et al 1996: 263).

There is considerable variation in the reported retention rates of longitudinal studies involving the homeless population. Retention rates in Australian studies range from over 80% at 12 months to as low as 40% (See Table 1a Appendix). In US studies retention rates are often much lower because they define homelessness more narrowly and generally sample the more chronic, street based homeless. In their longitudinal study Sosin et al (1990) reported a retention rate of 59 per cent after six months while Morrissey & Dennis (1990) cite retention rates as low as of 33 per cent. More recently, longitudinal evaluation studies in the US report much higher retention rates (Tsemberis 2010). International research suggests retention rates can be kept high by developing, before the research commences, a ‘systematic program of tracking techniques’ (Sullivan et al 1996: 264). While tracking is a complex undertaking previous research suggests that high retention rates are feasible if clear, common sense strategies are developed.

6.4 Major limitations of previous longitudinal studies

Despite the importance of longitudinal research being well recognised, the longitudinal data available on those either experiencing homelessness or that are vulnerable to homelessness has serious shortcomings (Rossi 1991, Frankish et al 2005 and Philippot et al 2007). Like most of the point-in-time studies, the samples employed tend to be either small, focus on a particular location and/or a specific demographic cohort. Further, most longitudinal studies only follow sample members for very short periods and typically only survey participants at two points in time. One exception to this is a survey of families receiving Aid to Families with Dependent Children (ADFC) in New York City (see Weitzmann et al 1990 and Shinn et al 1998 for descriptions of the study) that interviews participants twice over a five year period. In Australia both the J2SI project and Project I (see Table 1a) run over longer periods (4 and 5 years respectively) but they suffer other limitations (small sample size and limited demographic focus respectively).

Aside from longitudinal studies, administrative data is another a source of longitudinal information. In Australia, administrative data from Specialist Homelessness Services (SHS9) is collected over 12 months and provides some longitudinal insight into the homeless population (for instance on patterns of homeless support services usage). However, it only provides information on those who access SHSs and it cannot be analysed longitudinally over a longer period. New SHS data promises to be a richer source of longitudinal information but its major limitation remains, it will still only provide information on people while they use homelessness services. Also, as noted in FaHCSIA (2008), other limitations of this data include incomplete coverage of agencies, client consent not being provided and restrictions on data access due to confidentiality requirements set out in AIHW legislation.

This means that we are still left with very little information about pathways out of homelessness. Questions such as: what kind of housing do people find? Do they end up in social housing, public housing, supported housing, subsidised private housing or even in unsubsidised private housing? What are their transitions following this? Does the type of housing people enter make a difference to their probability of being securely housed over the longer term, i.e. are particular forms of housing better stepping stones than others? And does this relationship differ for different subgroups of the population? These are the sorts of questions Journeys Home is designed to answer.

Also, the bulk of the empirical work on factors contributing to homelessness is from the US where the influence of the individual perspective has been significant. There is an emerging consensus however that there is a need for empirical investigations to broaden their focus to determine the impact of structural factors (Calsyn and Morse 1991; Piliavin et al 1993). Structural factors are most commonly linked to the causes of homelessness and variations in the rate or prevalence of homelessness in specific areas but there have been few attempts to assess what effect social structures have on homeless duration.

* Formerly SAAP (Support Accommodation Assistance Program)
Another shortcoming of the existing literature is that studies rarely include an appropriate comparison group (i.e. the non-homeless) to compare the experience of the homeless with (Philippot et al 2007). The only known exception to this is the survey of ADFC recipients in New York City mentioned above. In this survey both homeless and housed families with children were followed over time to examine the features of respondent’s pathways in and out of homelessness. This survey provides rich information on the homeless pathways of ADFC families with children enabling examination of the factors associated with both entries and exits to homelessness. Its limitations however are obvious. Firstly its population scope is limited to the New York City area, which has many unique features that set it apart from other US cities (Weitzman et al 1990). Secondly, and perhaps most importantly, it only includes families with children, and thus only examines the experiences of a fraction of the total homeless population.
7. Conclusion

In this paper we have shown that despite substantial progress in homelessness research in some areas, particularly in the areas of definition and enumeration, there remains a need for large scale longitudinal data to better understand pathways into and out of homelessness. In order for this data to add to knowledge of causes and consequences of homelessness it is essential that it exhibits a number of key features.

Firstly, given the different approaches used to define homelessness both in Australia and elsewhere, it is important when designing a longitudinal study of the homeless that the survey instrument allows for considerable flexibility in enabling users to define homelessness. Housing circumstances need to be captured over a continuum, and the instrument should allow for different definitions – subjective, objective and time-based - of homelessness to be applied.

Secondly, it is essential that the study is able to capture both structural and individual factors. The survey instrument must therefore capture issues such as exposure to child abuse, illnesses or accidents; poor socioeconomic outcomes (income, education, unemployment); high housing costs (prices and interest rates), mental illness and poor overall health; and substance use and engagement in other risky behaviours. To fully explore the importance of structural factors however it is also essential that the study has the kind of scale and coverage of different areas so as to enable the examination of variations in macro level factors on individual circumstances.

Thirdly there needs to be particular focus on keeping attrition from the survey to a minimum, as one of the core methodological challenge facing all longitudinal studies, and particularly one focusing on such a disadvantaged and mobile population group, is that sample attrition tends to be non-random.

Finally, and perhaps most importantly, there is a need for a survey that is both representative of a broader population of homeless persons and that includes a group of people that are not currently homeless but vulnerable to homelessness. It is only with a survey targeting these two population groups that will enable researchers to rigorously examine pathways into and out of homelessness, the structural and individual level causes of homelessness, and key outcomes of homelessness.

Although Journeys Home has not been designed to enumerate the homeless it has been designed to exhibit the features above. It therefore has the potential to address many of the theoretical, methodological and definitional issues that have limited our understanding of homelessness. More specifically, as most Australian studies focus on the currently homeless, there is no data that captures the processes and mechanisms that tip some ‘at risk’ people into the homeless population or the processes and mechanisms that enable other ‘at risk’ or vulnerable people to remain housed. Similarly, there is only limited information on the processes and mechanisms that enable some people to exit from homelessness relatively quickly or the processes and mechanisms that result in some people becoming entrenched in homelessness. By supplementing existing data sources with a longitudinal study of the size, scope and duration proposed in Journeys Home will therefore enable policy makers, academics and service providers to have access to the sort of data that can answer these questions and assist them to develop effective, evidence based early intervention and prevention responses.
References


Flinders Institute of Public Policy and Management (1999) The measurement of client outcomes in SAAP services. (Canberra: Department of Family and Community Services).


The National Evaluation Team (1999) National evaluation of the supported accommodation program (SAAP III). Department of Family and Community Services, Canberra.


### Appendix

**Table 1a: Australian longitudinal studies of the homeless**

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Target population</th>
<th>Responding sample</th>
<th>Number of waves</th>
<th>Interval</th>
<th>Response and retention rates</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>In progress</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Journey to Social Inclusion (J2SI). Johnson, Parkinson, Tseng and Kuehnle (2011)</td>
<td>Long term homeless</td>
<td>Through random assignment: N=83 40 receiving J2SI services. 43 in the control group.</td>
<td>Eight waves</td>
<td>Every six months for four years</td>
<td><strong>Response rate</strong>: 86.5% <strong>Retention rate</strong>: 6 months: 87% 12 months: 83%</td>
<td></td>
</tr>
<tr>
<td>Melbourne Street to Home Johnson and Chamberlain (2011)</td>
<td>Vulnerable rough sleepers in Melbourne</td>
<td>First year: 50  Second year 50</td>
<td>Three waves</td>
<td>At entry, at 12 months and at 24 months.</td>
<td>Data not yet available</td>
<td>Took a photo of the respondents with their express permission to aid with tracking.</td>
</tr>
<tr>
<td>Brisbane Street to Home Parsell et al</td>
<td>Vulnerable rough sleepers in Brisbane</td>
<td>Unknown</td>
<td>Two waves</td>
<td>At entry and at 12 months</td>
<td>Data not yet available</td>
<td>Took a photo of the respondents with their express permission to aid with tracking.</td>
</tr>
<tr>
<td>Michael Project - Flatau</td>
<td>Cohort of Homeless men who entered the Michael Project between 2008 and August 2009</td>
<td>N=253</td>
<td>Three waves time</td>
<td>At entry, 3 months, and 12 months</td>
<td><strong>Response rate</strong>: Not published <strong>Retention rate</strong>: 3 months: 55.3% 12 months: U/A</td>
<td></td>
</tr>
<tr>
<td><strong>Completed</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Wards Leaving Care (Cashmore and Paxman 1996)</td>
<td>Young people discharged from care in NSW</td>
<td>N=47</td>
<td>Five waves</td>
<td>One before discharge, three, six and 12 months and 4-5</td>
<td><strong>Response rate</strong>: N/A <strong>Retention rate</strong>: 12 months: 96%</td>
<td></td>
</tr>
<tr>
<td>Study Title</td>
<td>Population Description</td>
<td>N</td>
<td>Waves</td>
<td>Timeframe</td>
<td>Response Rate</td>
<td>Retention Rate</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------</td>
<td>-----</td>
<td>-------</td>
<td>-------------</td>
<td>---------------</td>
<td>----------------</td>
</tr>
<tr>
<td>Resident Outcomes Study (Thomson Goodall 2001)</td>
<td>Residents of crisis accommodation in Melbourne</td>
<td>153</td>
<td>Two</td>
<td>Three months</td>
<td>53.5%</td>
<td>41%</td>
</tr>
<tr>
<td>Reconnect (FaCS, 2003)</td>
<td>Young people at risk of or experiencing homelessness</td>
<td>455</td>
<td>Two</td>
<td>10 months</td>
<td>45.5%</td>
<td>57.1%</td>
</tr>
<tr>
<td>Aboriginal family Homelessness Study (Roberts and Burgess 2003)</td>
<td>Indigenous families in Perth</td>
<td>61</td>
<td>Three</td>
<td>Over 15 month period</td>
<td>Unknown</td>
<td>93%</td>
</tr>
<tr>
<td>Ex-Prisoners and accommodation (Baldry, McDonnell, Maplestone and Peeters 2003)</td>
<td>Ex-prisoner at risk of homeless/residential instability</td>
<td>339</td>
<td>Four</td>
<td>Pre-release, 3,6,9 months post release</td>
<td>93%</td>
<td>70%</td>
</tr>
<tr>
<td>Hanover Family Outcomes Study (Horn and Cooke 2001; Kolar 2004)</td>
<td>Homeless families no longer in crisis</td>
<td>42</td>
<td>Five</td>
<td>Every six months for two years</td>
<td>N/A</td>
<td>71% by the fifth wave</td>
</tr>
<tr>
<td>On the Outside (Johnson et al 2008)</td>
<td>Broad group of homeless people in transitional or crisis accommodation</td>
<td>103</td>
<td>Two</td>
<td>12 months</td>
<td>46 per cent</td>
<td>76.6%</td>
</tr>
<tr>
<td>Project I (Mallet et al 2010)</td>
<td>Young homeless (12-20 yrs): 2 cohorts – newly homeless (less than 6 months) and experienced homeless</td>
<td>165</td>
<td>Four</td>
<td>Unknown</td>
<td>N/A</td>
<td>85% at each wave</td>
</tr>
</tbody>
</table>

It is unclear how participants were recruited but it appears all those eligible and volunteering to participate were included.
### Table 1b: Major UK and European longitudinal studies of the homeless

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Target Population</th>
<th>Responding sample</th>
<th>Number of waves</th>
<th>Interval</th>
<th>Response and retention rates</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Off to a bad start</td>
<td>Young homeless people</td>
<td>N=161</td>
<td>Two waves</td>
<td>12 months</td>
<td>Response rate: N/A (all those visiting service providers willing and eligible to participate were included)</td>
<td>Tracking methods were continuous and comprehensive, with researchers working closely with homelessness agencies. Sources included: a continuous log of contacts made by respondents to participating homelessness agencies; agency record cards; business cards given to respondents; networking with other young people; chance encounters; letters forwarded by probation and social services; and GP lists. The last two methods were less productive than the others.</td>
</tr>
<tr>
<td>Study of Homeless Applicants</td>
<td>Homeless applicants to local authorities</td>
<td>N=1497</td>
<td>Two waves</td>
<td>Between 11 and 18 months for tracking through LA records. Variable for survey interviews</td>
<td>Response rate: 61% Retention rate: 11-18 months: 68%</td>
<td>There were two elements to tracking. 1. Tracking through administrative records using pro formas. This was reported to be an extremely difficult and time consuming exercise. 2. Two structured interviews with applicants. A range of tracking methods were used including inquiries with neighbours; LA records; friend/relative contacts; change of address postcards; and forwarding letters through local housing and advice agencies. The last two methods were much less productive than the others.</td>
</tr>
<tr>
<td>From Street to Home</td>
<td>Ex-homeless people rehoused. Mainly single men</td>
<td>N=100</td>
<td>1 wave</td>
<td>N/A</td>
<td>Response rate: 69% Retention rate: N/A</td>
<td>This was not strictly speaking a longitudinal study, but rather a fully retrospective study of ex-homeless people.</td>
</tr>
</tbody>
</table>
Table 1c: Major US longitudinal studies of the homeless

<table>
<thead>
<tr>
<th>Project Name</th>
<th>Target population</th>
<th>Responding sample</th>
<th>Number of waves</th>
<th>Interval</th>
<th>Response and retention rates</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sosin et al (1990)</td>
<td>Homeless adults using services in Minneapolis</td>
<td>N=451</td>
<td>Two waves</td>
<td>Six months</td>
<td><strong>Response rate:</strong> N/A (all those visiting facilities willing and eligible to participate were included)&lt;br&gt;<strong>Retention rate:</strong> 58-59%</td>
<td>Used agency and family/friends informants. Also used change of address postcards, and signs and announcements in relevant services. Used two homeless people as ‘searchers’. Paid $7 for the second interview.</td>
</tr>
<tr>
<td>Homeless Research Demonstration Project (Cohen et al 1993)</td>
<td>Adults who were homeless and mentally ill</td>
<td>N=163</td>
<td>Three waves</td>
<td>4 and 12 months</td>
<td><strong>Response rate:</strong> N/A (all those visiting facilities willing and eligible to participate were included)&lt;br&gt;<strong>Retention rate:</strong> 76% at 4 months and 68% at 12 months.</td>
<td>Main sources were informants (both agency and friends/relatives) and archives/records (from mental health and shelter services). Used same researcher to track each participant throughout. Were persistent and flexible to enable immediate response when participants ‘surfaced’. Used telephone and face-to-face contact with clients rather than written communication wherever possible. Used ‘permission to locate’ forms. Offered incentives.</td>
</tr>
<tr>
<td>Pathways to Homelessness Among New York City Families (Weitzman et al 1990; Shinn et al 1998)</td>
<td>Families in New York City (NYC) receiving Aid to Families with Dependent Children (ADFC), one group that were homeless and one group that were not at the time of being selected</td>
<td>N=701 homeless families on ADFC and 524 families on ADFC not homeless</td>
<td>Two waves</td>
<td>4.85 years on average</td>
<td><strong>Response rates:</strong> 72 and 70% respectively for the two groups&lt;br&gt;<strong>Retention rates:</strong> 70 and 69% respectively for the two groups</td>
<td>There was evidence of non-random attrition with respondents interviewed at time 2 more likely to be African American than Latina or of another ethnicity, they reported more housing problems at time 1, and, were less likely to have spent time before the initial interview outside of NYC.</td>
</tr>
<tr>
<td>Wong et al (1997)</td>
<td>Homeless families entering the New York City shelter system</td>
<td>N=27,919</td>
<td>N/A</td>
<td>Two years</td>
<td>N/A as study uses administrative database</td>
<td>Tracked exits and re-entries to homeless shelters in New York using a unified database.</td>
</tr>
<tr>
<td>Wong &amp; Piliavin (2001)</td>
<td>Homeless adults using services</td>
<td>N=564</td>
<td>Two waves</td>
<td>Between 4 months and 1 year</td>
<td><strong>Response rate:</strong> 90%&lt;br&gt;<strong>Retention rate:</strong> 81%</td>
<td>Noted that ‘various tracking strategies’ were employed but gives no details. First wave of follow-up interviews were initially intended to take place after 4 months, but took up to 1 year because of search problems. Find evidence of non-random attrition.</td>
</tr>
</tbody>
</table>
| Caton et al 2005 | Adults without children entering NYC shelters for the first time in 2001 and 2002 | N = 445 | At 6-month intervals for 18 months | **Response rate**: N/A (all those visiting facilities willing and eligible to participate were included)  
**Retention rate**: 85% at 6 months; not published for further waves | State that ‘assertive client tracking methods’ were used but do not describe precisely what methods were used. Also make no mention of retention rate at the 18 month mark. |